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and Copyright Law  
and Litigation

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**FACSIMILE TRANSMITTAL SHEET**

**TO:** Office of Petitions  
**COMPANY:** United States Patent and Trademark Office  
**FAX NO.:** (571) 273-8300  
**FROM:** Keith R. Lange, Esq.  
Hall, Vande Sande & Pequignot, LLP  
**TELEPHONE NO.:** (301) 983-2500  
**FACSIMILE NO.:** (301) 983-2100  
**DATE:** November 28, 2005  
**RE:** US Patent Application No. 10/657,153  
**Number of Pages:** 15 (including cover sheet)

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PTO/SB/21 (08-04)

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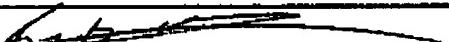
Total Number of Pages in This Submission

	Application Number	10/657,153
	Filing Date	September 9, 2003
	First Named Inventor	Amy Rutkowski
	Art Unit	3873
	Examiner Name	Sunil Singh
14	Attorney Docket Number	2535.110

## ENCLOSURES (Check all that apply)

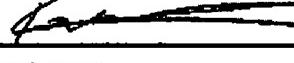
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input checked="" type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Hall, Vande Sande & Pequignot, LLP		
Signature			
Printed name	Keith R. Lange		
Date	November 28, 2005	Reg. No.	44,201

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Keith R. Lange	Date	November 28, 2005

This collection of information is required by 37 CFR 1.6. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<b>Effective on 12/08/2004.</b> <b>Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete If Known</b>	
		Application Number	10/657,153
		Filing Date	September 9, 2003
		First Named Inventor	Amy Rutkowski
		Examiner Name	Sunil Singh
		Art Unit	3673
		Attorney Docket No.	2535.110
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 <b>TOTAL AMOUNT OF PAYMENT (\$)</b> <b>750</b>			

**METHOD OF PAYMENT (check all that apply)**

- Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_
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**FEES CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (Including Reissues)

Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Fee (\$)</b>	<b>Fee (\$)</b>

- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of total claims paid for, if greater than 20.

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>

- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. Sec 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____	- 100 = _____	/ 50 = _____ (round up to a whole number)	_____ x _____	_____

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition Fee under 37 CFR 1.17(m)

**Fee Paid (\$)**

\$750.00

**SUBMITTED BY**

<b>Signature</b>	<i>Lange</i>	<b>Registration No.</b> <b>(Attorney/Agent)</b> 44,201	<b>Telephone</b> (301) 983-2500
<b>Name (Print/Type)</b>	Keith R. Lange		<b>Date</b> November 28, 2005

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